

**NATIONAL CONFERENCE
OF
VOLUNTARY ORGANISATIONS
ON
FAMILY WELFARE**

(4th September, 1985)

BACKGROUND PAPERS



**MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF FAMILY WELFARE
NEW DELHI**

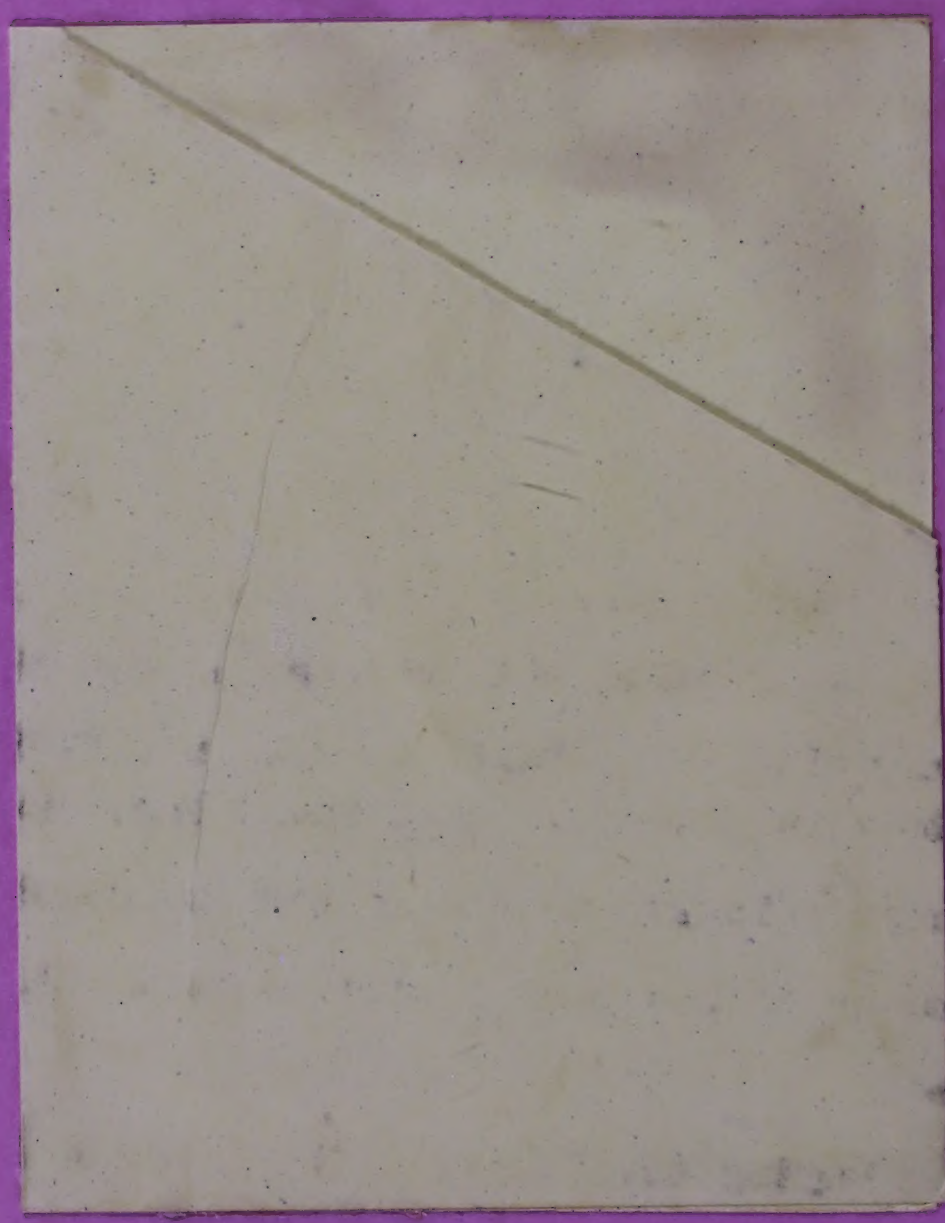
THE NATIONAL ARCHIVES

1900

RECORDS OF THE NATIONAL ARCHIVES

1900

RECORDS OF THE NATIONAL ARCHIVES



RECORDS OF THE NATIONAL ARCHIVES

RECORDS OF THE NATIONAL ARCHIVES

RECORDS OF THE NATIONAL ARCHIVES

COMMUNITY HEALTH CELL

BACKGROUND MATERIAL FOR DISCUSSION AT THE CONFERENCE OF VOLUNTARY ORGANISATIONS ON SEPTEMBER 4, 1985 AT VIGYAN BHAVAN, NEW DELHI.

.....

India's population has been growing at an alarmingly high rate. According to 1981 census it stood at over 68 crores and presently it is over 74 crores. This fast growth rate is causing serious concern to the Government. Equally serious concern has been expressed by various groups in the public including intellectuals, professionals, political leaders, social workers, etc. All these enlightened groups recognise that the high growth rate has very serious implications for the overall social-economic development of the country. In their own way, many individuals, and the groups in the voluntary sector have been doing an excellent dedicated work in spreading awareness and also in providing services to the people to enable them to plan their families.

It is quite well recognised now that efforts of family planning reach full success only if the survival of children is assured. Government has, therefore, accorded a very high priority to the Mother and Child Health Care Programme which has been integrated with the Family Welfare Programme.

During the 7th Five Year Plan which has commenced this year, Government has set for itself a very ambitious task of reaching the couple protection rate of 42 per cent as against the current level of about 32 per cent. Much greater emphasis will be laid on protecting people in the younger age groups by promoting specific methods like IUDS, condoms, pills etc. in a big way. Various innovative approaches are being evolved for this purpose and the communication strategy as also the social marketing of spacing devices are being

professionalise. At the same time, much greater emphasis will be given to measures relating to Mother and Child Health Care. It is targeted by the end of the 7th Plan that all expectant mothers would be provided to children for vaccination against vaccine preventable diseases. During the first quarter of the current year, the progress both in family planning methods and immunisation coverage has significantly stepped up compared to the corresponding period of the last year. For example, performance in sterilisation is about 30% more and the performance in IUDs is about 60% more. We have, therefore, started with a very birth outlook but the task ahead is very gigantic. New situations will keep on evolving and it will be necessary to devise new strategic approaches to cope with the emerging situations.

The policy of the Government is to promote family planning on a purely voluntary basis. This requires that people should themselves opt for this programme whereas Government and other agencies will provide the necessary services and supplies. To promote more demands for family planning acceptance, a new outlook is to be inculcated in the minds of the people. While Government is going to step up its efforts in this field and adopt a more professional approach the most effective instrument of demand generation are the voluntary organisations. It is they who have closer contact with the people and who understand their needs and aspirations. It is in this context that the role of voluntary organisations in the family welfare programme acquires paramount importance.

The National Health Policy of the Government, therefore, rightly envisages a key role of voluntary effort/organisation in the two most vital components of Health and Family Welfare Programme i.e. Primary Health Care and Population stabilisation. Family Welfare Programme has been accorded a high priority and involvement of Voluntary Agencies in the Programme is necessary for making it a People's Movement.

Family Welfare ought to be the concern of the community as a whole. Several Voluntary Organisations have been active in the socio-economic sectors besides health. Several such representative bodies have been invited to the Conference. It is possible that with an integrated approach the Family Welfare Programme can really become a People's Movement.

The Conference will elicit the views of the participants on the population policy, their perceptions, ways & means of maximising the returns on the investment made, whether certain areas of activity need to be strengthened etc.

Copies of the following documents are attached for ready reference:-

1. National Population Policy, 1976.
2. National Health Policy, 1983.

Several Voluntary Organisations invited to the Conference have sent in advance valuable suggestions and views for discussion in the Conference. At the State level also conferences/meetings of Voluntary organisations have been held in the last two months. Inter-departmental consultations have been held in Government of India to examine the difficulties highlighted by the Voluntary Organisations as also to consider the suggestions for forgoing linkages between the different sectors of socio-economic activity and bring those voluntary organisations also in the field of Family Welfare which have hitherto been working in other allied areas. The points raised for discussions have thus been classified into four broad topics as under:-

1. Ways and means of increasing the activities of Voluntary Organisations already engaged in Health & Family Welfare and encouraging them to go to urban slums and rural areas.

1. slums and rural areas.
2. Integrating Family Welfare activities with the present activities of Voluntary Organisations engaged in income generation, socio-economic activities etc.
3. Requirement of trained personnel for such Voluntary Organisations and how to meet the requirements of training and continuing education for them.
4. Managerial and administrative problems facing the Voluntary Organisations.

Background material on the above topics is enclosed for facilitating the discussions.

Introduction:

1.1. At present nearly 300 Voluntary Organisations including branches of the All India Organisations such as Family Planning Association of India, Indian Medical Association, Social Welfare Board, All India Women's Conference and many others, are assisting the Government in the Family Welfare Programme. Most of the Voluntary Organisations, however, appear to have been engaged primarily in promoting the Family Welfare Programme in the Urban areas only. The need for Family Welfare work and motivating the people to accept family planning is much more in the rural areas as 78% of our population live in villages. The Government is eager to extend Health and Family Welfare services to them as fast as possible, but many remote and difficult areas have not been effectively covered by the Government network of Rural Family Welfare Centres and Primary Health Centres. The Government looks up to Voluntary Organisations to come forward to supplement the Government efforts.

The urban slums present a different picture. The Urban Family Welfare Centres are usually attached to institutions run by the Government/Municipal Bodies/Voluntary Organisations. As most of these institutions are predominantly located in areas where density of poor and lower middle class families is somewhat low and the institutions ~~do not have proper outreach services~~, the people most needing family planning advice/services or primary health care services tend to get left out. All urban areas have thus come to have certain classic symptoms. Poor and ~~are~~ lower middle class people/crowded in highly unhygienic environmental conditions, in slum areas or other crowded areas, and in these places, the environmental sanitation is poor or in the case of slums, totally lacking; water supply is inadequate or absent; water disposal is improper; people are poor and unable to afford costly medical care; health facilities are either few or not available. These conditions provide a fertile ground for spread of diseases.

1.2 The need of the hour is to ensure that services to the rural and less-served areas are made available in the matter of

health and family welfare education, information and motivation, provision of supplies, M.C.H. services and rudimentary medicines for common ailments. IUD insertions/sterilisation services/supply of contraceptives and immunisation services should also be made available in an acceptable and accessible manner.

Issues for consideration:

2.1. The coverage of the rural and other less-served areas is limited at present perhaps due to organisational and financial constraints. It is necessary that there is greater interaction between the Government and the Voluntary Organisations so that the valuable experiences and the knowledge gained by the Voluntary Organisations could benefit the entire Health and Family Welfare undertaken by the Government. Where the Voluntary Organisations have resource constraints, they shall get financial support for expansion and consolidation of their activities. The various suggestions made and issues involved, as noted below may be considered in regard to the Voluntary Organisations expanding their activities to the rural and urban slums areas:-

- i) Many of the bigger Voluntary Organisations are running Mobile Clinics. They could be encouraged and persuaded to adopt certain rural/slum area and extend their activities initially through Mobile Clinics and subsequently through Rural Family Welfare Outposts/Clinics.
- ii) The Voluntary Organisations may be encouraged to adopt some remote and difficult areas for an all-round development and extension of Health and Family Welfare Programme. (The areas to be covered may be earmarked for coverage according to geographical jurisdiction by Voluntary Organisations who may be willing to undertake and carry on this work. No pattern need be developed for such Voluntary Organisations but a lumpsum provision may be made by the Government for activities which may be specified).
- iii) N.S.S. Camps, which the people now perceive as a joint cooperative effort of the local community and the students, should be organised in such a way that the camps are run throughout the year, batch by batch, so that there is a

- continuity in the Health and Family Welfare Programme to the benefit of the rural areas. For this, a nucleus may be necessary in the particular rural areas. This could be provided by a Voluntary Organisation active in that area, by the Block/Panchayat Samiti or even by the organisations such as Nehru Yuvak Kendras.

iv) Most of the voluntary organisations, though enthusiastic to plunge into the programme, do not have enough competence to formulate proper proposals and plan their activities, especially at grassroot level. This is evident from the fact that a large number of them are mostly institution-based running dispensaries/hospitals for the poor and backward classes and providing mainly curative services. There are also organisations working in allied fields such as adult literacy, child care, rural upliftment etc. who could easily extend their activities to include family welfare. But they need guidance and consultancy services. Also for such marginal inputs they should not have to go to Government Departments for grants-in-aid. There is, therefore, a need for providing consultancy services to such organisations and also funds for marginal inputs. Leading Voluntary Organisations such as Family Planning Association of India, who have the potential to provide such services to the newer and smaller voluntary organisations, can play a great role in this direction. There may be a further need for more such consultants.

v) The Voluntary Organisations may be encouraged to extend facilities for IUD insertion, sterilisation and post-partum programme either by establishing Rural Family Welfare Centres or some nucleus in the rural areas and services through referral and upgraded rural hospital/community Health Centres. These will be supplementary to the Governmental infra-structure and not on parallel lines.

vi) The Voluntary Organisations can effectively assist in the implementation of the programme of universal immunisation which Government has decided to launch this year on November 19, as a tribute to the memory of Late Prime Minister Smt. Indira Gandhi. Outreach programme for this would be particularly welcome.

vii) There are a large number of private medical practitioners, especially in the Indian System of Medicine, in rural areas. They have a greater rapport with the local population they serve and will be a potent means of health education and in prevention and treatment of communicable diseases, M.C.H. activities and Family planning. They may be actively involved, some of them could become Depot Holders of Nirodh. Even for IUD and Oral Pills, a scheme akin to Depot Holders could be started. The ISM practitioners and para medicals could be given a short term orientation course in Family Welfare. Simple returns should be prescribed for getting the supplies. They should not be loaded with elaborate accounting or book keeping responsibilities in this regard which would be counter-productive.

viii) For expansion of their activities, the Voluntary Organisations require trained workers for which sufficient training facilities are not available with them. In this connection, the following suggestions may be considered:

a) HFWTCs (i.e. Health and Family Welfare Training Centres being run by the Union Ministry and Health Family Welfare) and other similar Government Institutions may accept nominees of such Voluntary Organisations in their training programmes. They may organise short-term need based courses for the workers of the Voluntary Organisations for which the curriculum may be standardized. The areas of training may be identified by the Voluntary Organisations. Necessary financial support may be provided for strengthening these institutions. At the same time, the projects developed by the Voluntary Organisations may include the training component so that requisite funds are built in for this purpose in the project proposals.

b) Leading/large Voluntary Organisations, who are conducting training programmes for their own workers, may also undertake training of workers of newer and smaller Voluntary Organisations who do not possess such facilities. Necessary financial assistance may be provided to these Voluntary Organisations for strengthening/enlarging their faculty and other training facilities to undertake the training responsibility of training other voluntary workers.

c) With a view to overcome the shortage of trained personnel at the grass root levels, the services of Dais, V.H.Gs, Anganwadi and other workers of health related sectors may be utilised after proper orientation.

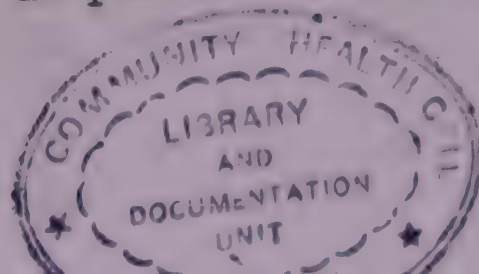
..10/-

The strategy for promoting planned parenthood include operational linkages with other Ministeries/ Departments so that Family Planning does not remain the isolated work of one Ministry viz. Ministry of Health and Family Welfare, but the small family Norm is woven into the fabric of national life in all spheres. In this context, the Sixth Five Year Plan document recommended that "Family Planning cannot be the sole responsibility of any one Department but of Government as a whole. The areas of useful activity in each Ministry/Department in relation to Family Planning will have to be identified, spelt out in precise terms and responsibility for these activities squarely fixed on the Ministeries/Departments." In the light of this observation, series of meetings with various Ministeries/ Departments have taken place to identify the areas of useful activities in the field of Family Welfare which could be covered by Voluntary Organisations/Govt. Deptts. through marginal inputs and to have an integrated approach to the problem.

However, purely Government programmes are not always able to mobilise community resources on a sufficient scale and give people a sense of participation which is often so essential for the success of any developmental/welfare programmes. There is thus a positive need to supplement State action by supporting activities of non-governmental organisations to ensure maximum effectiveness of these programmes. As the Approach Paper on the Seventh Five Year Plan observes "a monitoring machinery will have to be created and strengthened to establish that target groups have, in fact, received the benefits, assets and items of social consumption that are being provided for them as part of the national effort for significantly reducing poverty levels. Voluntary Organisations will have to be associated more closely and actively than hitherto, with programmes for reduction of poverty and with efforts to make minimum needs available to the population for improving the quality of life. This will be incorporated as part of the overall

0990

WH140



..11/-

strategy for augmenting such programmes meant for the poor, and also as an alternative feed-back mechanism for ascertaining whether the target groups have received the benefits meant for them".

The great strength of the voluntary sector is their voluntariness, commitment, dedication in the services they provide and closeness to the people they serve. They are also more responsive to the new ideas because they enjoy more flexibility in functioning as compared to the Government set-up. They are more effective in the community because of their relatively close contacts with the people and working in relatively informal setting while the programme run by the Government machinery is likely to be taken as a more formal programme and the corresponding acceptability may accordingly be relatively less. Furthermore, the Voluntary Organisations enjoy greater confidence of the community because of the help they render in their socio economic upliftment, this results in greater acceptability of the programmes by the community.

2. The number of Voluntary Organisations working for the welfare of the community is very large. Besides, health & F.W. they are working in the fields of education, rural development, uplift of women, child care, etc. To quote some examples of the voluntary organisations working under the various social welfare/developmental programmes carried out by the various Ministeries/Departments:

- (i) Education Ministry implements the Scheme of Adult Education for illiterates in the age group of 15-35, Non-formal Education programmes for out-of-school children in the age group of 6-14 and Early Childhood Education programmes for children in the pre-school stage. In all the three schemes, the vol. orgns. are participating.
- (ii) Rural Development Department implements schemes like Development of Women and Children in Rural Areas (DWCRA) which aims at promoting income generating activities among rural poor women and also provide supportive services through the agency of group action. The other services of the Department which have potential voluntary involvement are Rural Landless Employment Guarantee

in a big way.

Programme(RLGEP), Training of Rural Youths for self-Employment(TRYSEM), National Rural Employment Programmes (NREP), Integrated Rural Development Programme(IRDP), etc.

(iii) The Ministry of Women and Social Welfare implements the Integrated Child Development Service Schemes for the welfare of children in need of care and protection and the condensed Courses of Education for Adult Women(CCEAW). Mahila Mandals at various levels are doing excellent work, in these fields. There are also various other activities for uplift of the social status of women, rendering legal aid to the destitutes, etc.

(iv) The Ministry of Home Affairs gives aid to Voluntary Organisations mainly for the purpose of opening of schools hostels, training in arts and crafts, for running Ashram Schools etc.

3. All these schemes at poverty alleviation of people in the rural areas and majority of the beneficiaries of these schemes are illiterate. The schemes require potential beneficiaries to come to one place for either acquiring a skill or to be in their labour. The opportunity of their coming together could be utilized to reach the messages and facilities of the F.W. programmes, to these target groups. The various voluntary organisations of different types, working for different purposes and providing different types of services have one thing in common viz. their reach to the community is very large. Because of the useful services that they provide, their workers have earned more credibility and are in a better position to spread the message of Family Welfare and motivate and persuade the couples through the forum already existing.

4. The Voluntary Organisations are in a better position to promote social acceptance of later age at marriage, child spacing among couples where the wife is in her 20's, limitation of the number of children to two, preferably to be reached before the wife is 30 and immunisation of mother and child. Modification of social and cultural norms and tradition in order to prevent early marriages, reform of marriage customs including dowry and bride's price, promotion of female education and functional literacy, health education & child care(leading

to higher child survival) & promotion of small family norm may constitute the central focus of the integrated approach.

- (i) The voluntary organisations engaged in different types of activities may include Family Welfare as one of their aims and objectives (in their Memorandum of Association) and may also seek additional grant-in-aid, if considered necessary for extending their activities to Family Welfare. The main intention is to create awareness in the masses about the advantages of a "Small Family" norm and guide them to avail of the existing infrastructure of Health and Family Welfare. If possible, services like supply of condoms may also be taken up. Since the voluntary workers would be available within the vicinity and reach of young couples, they will be able to provide advice more frequently and intimately and guide the motivated couples to the Family Welfare Service centres.
- (ii) All local bodies (village/block/district) should have a Committee on Family Welfare. In places where such committees do not exist, they may be constituted. The grass-root level bodies can play an active role in village and Block Level Committees for Family Welfare with sufficient representation of women, youth, backward communities, formal/informal opinion leaders and teachers; Retired/released defence personnel and retired Government servants constituting a vast source so far untapped, may also be associated with these committees. These committees may function as Public Action Groups and bring to bear social pressure on the Community for late marriage and small family norms etc. They may also provide a nucleus for coordination and cooperation with other voluntary organisations willing to provide family welfare services in the area.
- (iii) The student members of National Service Scheme (NSS) which is in operation in almost all the universities and professional institutions could be utilised for promotion of family welfare programme at the grass root level during vacation and in cases of emergency provide social services

to the community, wherever needed. For this purpose, schemes may be drawn by a Consultative group for involvement of National Service Scheme in the family welfare programme. The members of NSS could be oriented in various aspects of information, education, communication and motivation in relation to family welfare programme to spread the message of small family norms. The volunteers of NSS could also be encouraged to organise, mobilise public opinion on the issues of age at marriage, small family norm, vital registration and similar issues.

- (iv) The NSS volunteers can carry on these activities with the support of the village Health and Family Welfare Committees.
- (v) The voluntary bodies/organisations such as Lions Club, Rotary Club, Bharat Sewak Samaj, religious organisations like Rama Krishna Mission and other similar organisations working at the grass root level for the socio-economic upliftment of the rural masses may be encouraged to incorporate the promotion of family welfare and small family norm messages in their activities. Some of these organisations are already organising sterilisation camps in rural areas. It will be desirable that necessary financial and/or technical support may be provided by the Government (according to their need) to these bodies for extension of their activities and integration of the family welfare programme with their regular activities at the grass root level.
- (vi) Several voluntary and Social Welfare Organisations including self-employed groups of workers are engaged in socio-economic and income generating activities such as Lijjat Papad, bidi making, garment export, Khadi and Village Industries etc. and have a sizable membership. The members of these organisations, after proper orientation in information, education communication and motivation for promotion of family welfare programme could be entrusted the distribution of contraceptives (depot holders)/ maintenance of eligible couple register, and spreading the messages of small family norm. Among the self-employed groups, those who belong to adolescent group, may be exposed to

population education and family life education which will equip them to establish as responsible future parents. They could also be utilised for dissamination of family life education information among the members of the poor groups.

5. The participants may consider ways and means as how the Voluntary Organisations can pass on the message of Family Welfare also along with their own activities.

Training forms perhaps the most important component of the Family Welfare Programme. Family Planning intimately touches the most sensitive areas of individual's personal life. It is, therefore, necessary to orient the functionaries at all levels to understand their role and to develop necessary skills to be able to make the programme a success.

2. The problem of extending the available training facilities has to be examined from two angles. The Voluntary Organisations at present engaged in Health and Family Welfare activities, mainly in urban areas, have to extend their activities to rural and less-served areas like urban slums; they will require more trained workers. Secondly, the Voluntary Organisations engaged in various social welfare, developmental etc. activities have also to carry a message on family welfare and it would not be feasible to involve them in I.E.C. Programme without proper orientation on objection of Family Welfare Programme and without outlining their expected role in the programme.

3. For providing the training facilities for the workers of the Voluntary Organisations already engaged in Health and Family Welfare Programmes, the following suggestions may be considered:

- 1) HEWTCs (i.e. Health and Family Welfare Training Centres being run by the Union Ministry of Health and Family Welfare) and other similar Government Institutions may accept nominees of such Voluntary Organisations in their training programmes. They may organise short-term need-based courses for the workers of these Voluntary Organisations for which the curriculum may be standardized. The areas of training may be identified by the Voluntary Organisations. Necessary financial support may be provided for strengthening these institutions. At the same time, the projects developed by the Voluntary Organisations may include the training components so that requisite funds are built in for this purpose in the project proposals.

ii) Leading/large Voluntary Organisations, who are conducting training programmes for their own workers, may also undertake training of workers of newer and smaller Voluntary Organisations who do not possess such facilities. Necessary financial assistance may be provided to these Voluntary Organisations for strengthening/enlarging their faculty and other training facilities to undertake the responsibility of training other Voluntary workers.

iii) With a view to overcome the shortage of trained personnel at the grass root levels, the services of dais, health guides, anganwadi and other workers of health-related sectors may be utilised after proper orientation.

3. The training requirements for the integration of the socio-economic activities at grass-root levels are two fold- first to introduce integrated courses for training and second to integrate the activities of the Voluntary Organisations with Family Welfare Programme. It may be noted in this connection that several Ministries/Departments are running/sponsoring training programmes for the workers of Voluntary Organisations, engaged in their developmental programmes and schemes. A few examples of such schemes are given below:

- i) Education Ministry implements the scheme of adult education for illiterates in the age group of 15-38, Non-formal education Programmes for out of school children in the age group of 6-14 and early Childhood Education Programmes for Children in the pre-school stage. In all the three schemes, Voluntary Organisations are functioning well.
- ii) Rural Development Department implements schemes like Development of Women and Children in Rural Areas (DWCRA), which aims at promoting income generating activities among rural poor women and also provide supportive services through the agency of group action. The other schemes of the Department which have potential

voluntary involvement are Rural Landless Employment Guarantee Programme (RLEGP), Training of Youth for Self Employment (TRYSEM), National Rural Employment Programme (NREP), Integrated Rural Development Programme (IRDP).

iii) The Ministry of Women and Social Welfare implements the Integrated Child Development services/schemes for the welfare of children in need of care and protection and the condensed Courses of Education for Adult Women (CCEAW).

iv) The Ministry of Home Affairs gives aid to voluntary Organisations mainly for the purpose of opening of school hostels, training in arts and crafts, for running Grah Kalyan Kendras etc.

Since the training programmes, whether run by the Government institutions or by the Voluntary Organisations are generally as per an approved curriculam, the component of Family Welfare should be included in the courses of training programmes as effectively as possible.

4. For the workers of the Voluntary Organisations engaged in social welfare, socio-economic etc. activities, training teams could be formed which will be imparting training on family welfare topics. These teams would comprise trained members from amongst several other Voluntary Organisations. Such teams could go from place to place and organise short duration training workshops at the venue available in the local areas. To carry out such training workshops, these organisations could be provided funds on the basis of number of workers to be trained by them. Thus, for a batch of 40 workers' training for one day, a sum of Rs.400/- may be provided. These workshops may be limited to one or two days' duration as facilities of stay and lodging may not be available everywhere.

Such orientation workshops will have to be arranged at National, State and District/Block levels. The topics to be covered in the workshops will be broadly as under:-

- Orientation on population problem. To seek support for

population control for creating favourable climate in advocating contraceptives.

- Education and Information about bio-medical aspects of contraceptives.
- Pro-cons, contraindications of contraceptives.
- Supply logistics for rural distribution of contraceptives.
- Information and mechanism of contraceptives supply, out-reach, depot holders and supply agencies.
- Role of agencies and role of workers at specific areas to create awareness about family welfare.

The HFWTCs and other Government Training Institutes may develop suitable training packages to train the personnel in different welfare sectors. These packages may be given to them so that they can integrate these packages in the curricula of their own regular training programme.

The orientation training workshops will be a crash programme which should be taken up soon. The responsibility of different institutions at National, State and District/Block level may be briefly as under:

National Level Workshops: Workshops may be organised for units/organisations/agencies which have a national (all India) set up. Mostly senior level officers who are looking after organisational matters, policy decision, educational activities and service aspects will participate in the National Workshops. The role of Department of Family Welfare will be to act as a catalyst to bring them together for orientation on Family Welfare. These Organisations will then organise workshops at State and District levels.

State Level Workshops: Mass Education and Information sections of State Health and Family Welfare Directorates may organise these State Level Workshops for all types of organisations and agencies operating in each State. The HFWTCs as well as Post Partum units, Nursing Schools and Medical Colleges stationed at the State capitals could help in conducting the

Workshops. Each State MEIO may organise these State Level Workshops.

District and Block Level Workshops: At district as well as Block level, workshops will be organised for participants comprising all types of agencies together with government run welfare organisations. This should include workshops for all non-governmental welfare agencies. At District and Block levels these agencies are playing an important role in bringing social change and economic development. They would be sensitised on objectives of population control and to seek their help in propagation as well as distribution of contraceptives. These workshops, therefore, may be of longer duration and will address themselves for actual coordination between several local agencies. District Extension Educators, DEMOs and BEEs may coordinate in organisation of these workshops.

6. The participants may consider the above views and suggest measures to draw up a precise plan of action indicating inter-alia their specific comments on the following points:

- i. Identification of the different categories of the workers of Voluntary Organisations who require orientation training.
- ii. The contents of the syllabus and topics for orientation training.
- iii. The duration of training/orientation for different categories of workers.
- iv. The necessity of refresher courses from time to time.
- v. How to expand the available facilities and the plan for training at different levels.
- vi. Quantum of funds or other types of assistance required for all the above activities.

..21/-

TOPIC NO:4

It has been the endeavour of the Government to ensure that the Voluntary Organisations engaged in the Health and Family Welfare Programmes do not face any unnecessary hurdles or bottlenecks in the implementation of the Programme. However, difficulties do arise at times. Various remedial measures already taken/being taken by the Government and also the suggestions made by the Voluntary Organisations are briefly recapitulated below:

I Streamlining the procedure for grants-in-aid to Voluntary Organisations.

1) The major and recurrent complaint of the Voluntary Organisations has been the delay in the release of grants to them by the State Governments for the implementation of the Government sponsored schemes. It has been impressed upon the State Governments on more than one occasion that the Voluntary Organisations - especially the smaller ones - have limited financial resources and are virtually dependent on grants-in-aid for the implementation of these schemes and that they should take immediate remedial action in the matters of release of grants. With a view to avoid delay in the release of grants, the Government have recently enhanced the powers of the State Governments to sanction Grants-in-aid for the pattern schemes. The State Governments can now release grants-in-aid upto a ceiling of Rs. 5 lakhs per annum to each unit instead of the earlier ceiling of Rs. 2.50 lakhs, similarly, the State Family Welfare Officer has been/ to release grants upto Rs. 2 lakhs, instead of Rs. 50,000.00 in urgent cases. It is expected that with the issue of these orders, funds for the Voluntary Organisations can be released more expeditiously by the State Governments as the need for references to the Government of India for administrative approval would be almost totally eliminated.

ii) The State Governments have also been advised to take the following steps:

- (a) Holding of meetings of the State Grants Committee regularly and periodically.

- b) Association of ~~the~~ or two representatives of the Voluntary Organisations and local bodies as member of the Grants Committee constituted at various levels in the State.
- c) Holding of the meetings of the Voluntary Organisations in the State frequently to identify and to find out solutions to problems faced by them.
- d) Adequate training to the staff dealing with release of grants to the Voluntary Organisations in the procedure thereof.

iii) The Government has done some thinking on the concept of creation of "Single Window Clearance" system wherever possible, to enable prompt disposal of applications and grievances of the Voluntary Organisations and for establishing closer and better rapport with them. A beginning has been made in this direction by preparing a booklet containing the schemes of Health and Family Welfare under which financial assistance is available to the Voluntary Organisations. Further, a Joint Secretary has been appointed to exclusively deal with all the problems being faced by the Voluntary Organisations in the matter of release of grant-in-aid, consultancy services etc.

II

Need for grants to be given for flexible programming but with defined goals.

The Family Welfare Schemes for financial assistance to Voluntary Organisations are mostly patterned schemes i.e. schemes under which grants-in-aid are given for specific Family Planning activities and in accordance with a pattern of assistance prescribed by the Government. On the demand of the Voluntary Organisations engaged in the programme for giving some flexibility to them in their approach and implementation, a new scheme called "Experimental/Innovative Projects Scheme" was started during the year 1981-82. Financial assistance is given under this scheme for projects not conforming to any particular pattern but which are viable and aim to provide motivation, communication, educational activities and services, or are

otherwise of innovative nature. The keenness of the Government to popularise this scheme can be judged from the fact that the annual budget provision for this scheme was raised from Rs. 20 lakhs during 1983-84 to Rs. 40 lakhs during 1984-85 and a still larger amount of Rs. 90 lakhs has been provided for this scheme during the current financial year. It is gratifying to note that an amount of about Rs. 40 lakhs has/already been released within a short span of four and a half months and more schemes are in the pipe-line.

III Provision of consultancy services to the Voluntary Organisations in respect of project proposals and implementation.

A suggestion was made that the larger Voluntary Organisations taking a leading part in the Family Welfare Programme should come forward to provide consultancy services to smaller Voluntary Organisations in designing and efficient implementation of project proposals for family welfare activities. In pursuance of this suggestion the Family Planning Association of India was approached and have agreed to start a consultancy cell at their headquarters a revolving fund of Rs. 5 lakhs has been placed at their disposal to help smaller Organisations to formulate and implement projects in the field of family welfare.

IV Need for Monitoring and Evaluation

Suggestions have been made by some Voluntary Organisations that ways and means should be considered for evaluation and feedback of the work done by the Voluntary Organisations. Over the various Plans, the Government have been providing funds to Voluntary Organisations to secure their involvement in accelerating the speed of performance under the Family Welfare Programme to meet the national goals set for achievement by the turn of the century. There is, however, no scientific feedback on the evaluation of their activities and as a consequence, on the right utilisation of the funds provided to them for such activities. In the absence of the feedback, it is also not possible to consider how an innovative Family Welfare Project being

carried out by a Voluntary Organisation in a particular area can be suggested for trial in other areas also. It is imperative that we should have an appropriate system for monitoring the activities and getting regular feed back on these Voluntary Organisations some of which are getting sizeable funds on a regular basis. Besides, there is also a necessity for adequate manpower both at the Central and State levels to monitor the activities of these agencies on a regular basis. To supplement the monitoring, it may also be desirable to have evaluation of their activities to find out the weak points as well as the strong points in implementation of the programme by them so as to reorient further strategy. Such evaluation could ideally be taken up by autonomous bodies like the International Institute of Population Sciences, Bombay, and the National Institute of Health and Family Welfare, or by Population Research Centres.

The immediate need is, therefore, to systematise the collection of data about the activities of these Voluntary Organisations at the national level and State levels and Standardisation of records and returns to be maintained by these agencies. Some key indicators for monitoring purposes to assess their activities also need be worked out. As a matter of fact, a proper monitoring and evaluation machinery need be provided for.

The participants may like to make suitable recommendations in this regard. Some of the specific aspects which could be considered are as under:-

- i) Standardisation of records and returns to be maintained and furnished by these agencies. A sub-working Group may have to be constituted for making suitable recommendations in this regard. It may also work out key indicators which could be utilised for monitoring purposes.
- ii) The possibility of undertaking external evaluation by independent organisations like I.I.P. S., Bombay, NIHFW, New Delhi, at an interval of

3 to 5 years later on.

- iii) Providing suitable staff contingent both at Central and State levels to coordinate and monitor the additional aspects of evaluation in voluntary organisations.

V. Revision of the prescribed rates of grants-in-aid as per the approved pattern.

Many representations have been received from the Voluntary Organisations in regard to the inadequacy and short-comings of the pattern of grants-in-aid released to them as per the approved pattern of schemes. Some of the points mentioned by them are as follows:

- i) The salary and allowances allowed to be paid to the staff are less than the corresponding pay allowed to the Government staff, as a result of which it is difficult to recruit dedicated workers. There are also no avenues of promotion to the staff recruited by the Voluntary Organisations in as much as the patterns of grants-in-aid does not provide for such contingencies. No extra payment is made for the appointment of a substitute whenever any voluntary worker proceeds on leave. There is also no provision of extra funds for the grant of Contributory Provident Fund by the Voluntary Organisations, who themselves depend on public donations and have no extra services of income and as a result, several Voluntary workers, who have dedicated their entire life to social service, are forced to retire without any pension, gratuity and sense of security in old age.
- ii) The rates of grants-in-aid prescribed for the various schemes viz., Sterilization Beds Scheme, Post-partum Centre etc. are very low on account of the increased cost of living all round.
- iii) The requirement of appointment of minimum staff as per the approved pattern for some of the schemes like Urban Family Welfare Centres need to have a second look

in-asmuch as qualified staff is not available within the meagre grants released for the purpose.

The difficulties experienced by the Voluntary Organisations in all these matters may be discussed to devise ways and means as to how they can be overcome so that fresh guide-lines for the release of grants can be worked out. However, it may also be noted that Voluntary Organisations should not depend entirely on grants-in-aid but supplement their efforts by their own services and also a percentage of their own funds raised by Public donations. It may be noted in this connection that on a suggestion made by some Voluntary Organisations, a reference has been made to the Ministry of Finance for considering liberalised income-tax exemptions on the donations made to the Voluntary Organisations. The matter is under their consideration. Even under the existing exemptions, it should not be difficult for the Voluntary Organisations to attract funds from philanthropic subscribers.

* * *

